

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. <b>097762472</b>		FILING DATE <b>29 MAR 2001</b>	
						APPLICANT(S) <i>del</i>			
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1			/				51		
2			/				52		
3				/			53		
4				/			54		
5				/			55		
6				/			56		
7				/			57		
8				/			58		
9				/			59		
10				/			60		
11				/			61		
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42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.			2				TOTAL IND.		
TOTAL DEP.			9				TOTAL DEP.		
TOTAL CLAIMS			11				TOTAL CLAIMS		